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10/728335

EL0471USNA

Amendment and Response

Terminal Disclaimer

Fee Sheet

Page 1 of 7

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NO. 8088 P. 2

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PTO/SB/17 (02-07)

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Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/726335
		Filing Date	December 04, 2003
		First Named Inventor	Jay Robert Dorfman
		Examiner Name	
		Art Unit	1751
TOTAL AMOUNT OF PAYMENT (\$) 130.00		Attorney Docket No.	EL0471USNA

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: **50-0421** Deposit Account Name: **Solae, LLC**

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	<input type="checkbox"/> 300	150	<input type="checkbox"/> 500	250	<input type="checkbox"/> 200	100	0.00
Design	<input type="checkbox"/> 200	100	<input type="checkbox"/> 100	50	<input type="checkbox"/> 130	65	0.00
Plant	<input type="checkbox"/> 200	100	<input type="checkbox"/> 300	150	<input type="checkbox"/> 160	80	0.00
Reissue	<input type="checkbox"/> 300	150	<input type="checkbox"/> 500	250	<input type="checkbox"/> 600	300	0.00
Provisional	<input type="checkbox"/> 200	100	<input type="checkbox"/> 0	0	<input type="checkbox"/> 0	0	0.00

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)

Small Entity Fee (\$)

Each independent claim over 3 (including Reissues)

50

25

Multiple dependent claims

200

100

360

180

Total Claims**Extra Claims**

Fee (\$)

Fee Paid (\$)

- 20 or HP =

x

50.00

=

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims**Extra Claims**

Fee (\$)

Fee Paid (\$)

- 3 or HP =

x

200.00

=

HP = highest number of independent claims paid for, if greater than 3.

YES ☐ 360.00

Fee (\$)

Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets**Extra Sheets**

Number of each additional 50 or fraction thereof

Fee (\$)

Fee Paid (\$)

- 100 =

/ 50 =

(round up to a whole number) x

250.00

=

4. OTHER FEE(S)
☐ Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

☒ Other (e.g., late filing surcharge): Terminal Disclaimer

130.00

SUBMITTED BY

Signature	<i>Barbara C. Siegel</i>	Registration No. (Attorney/Agent)	30,684	Telephone	(302) 992-4931
Name (Print/Type)	Barbara C. Siegel	Date	8-9-07		

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